*				
<010>	Study Area Code	411777		
<015>	Study Area Name	GOLDEN BELT TEL ASS	N	Received & Inspected
<020>	Program Year	2015		
<030>	Contact Name: Person USAC should contact with questions about this data	Gina Roney		JUN 2 6 2014
<035>	Contact Telephone Number: Number of the person identified in data line <03	7192664334 ext. 0>	11.27	FCC Mail Room
<039>	Contact Email Address: Email of the person identified in data line <030>	groney@tcatel.com		
				(check box when complete)
<100>	Service Quality Improvement Reporting		(complete attached worksheet)	✓
<200>	Outage Reporting (voice)		(complete attached worksheet)	1
<210>	The state of the s	f no outages to report		✓ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □
<300>	Unfulfilled Service Requests (voice)			
<310>	Detail on Attempts (voice)		A ROSE I MEET	
			(attach descriptive	document)
<320>	Unfulfilled Service Requests (broadband)	0		1
<330>	Detail on Attempts (broadband)		(attach descriptiv	e document)
-100>	Number of Complaints per 1,000 customers (voice			70.
<400>	Fixed 0.0	.e)		
<420>	Mobile 0.0			
<430>	Number of Complaints per 1,000 customers (bro	adband)		1
<440> <450>	Fixed 0.0 Mobile 0.0			
<500>	Service Quality Standards & Consumer Protection 411777KS510.pdf	n Rules Compliance	(check to indicate certification)	1
<510>			(attached descriptive document)	<b>/</b> /
<600>	Functionality in Emergency Situations		(check to indicate certification)	/ /
	411777KS610.pdf			
	1		(attached descriptive document)	
<610>	1			
<700>	Company Price Offerings (voice)		(complete attached worksheet)	<b>✓</b>
<710>	Company Price Offerings (broadband)		(complete attached worksheet)	
	Operating Companies and Affiliates		(complete attached worksheet)	7
	Tribal Land Offerings (Y/N)?  Voice Services Rate Comparability	(if ye	es, complete attached worksheet) (check to indicate certification)	✓ ·
	411777KS1010.pdf		]	
<1010>			(attach descriptive document)	1
<1100>	Terrestrial Backhaul (Y/N)?	(if	not, check to indicate certification)	<b>✓</b>
<1110>	8		(complete attached worksheet)	31.0
	Terms and Condition for Lifeline Customers		(complete attached worksheet)	1
	Price Cap Carriers, Proceed to Price Cap Addition		-	
<2000>	Including Rate-of-Return Carriers affiliated with	Price Cap Local Exchange	Carriers (check to indicate certification)	
<2005>			(complete attached worksheet)	
	Rate of Return Carriers, Proceed to ROR Addition	nal Documentation Works		
<3000> <3005>			(check to indicate certification) (complete attached worksheet)	

1

(complete attached worksheet)

SOURCE STREET,	rvice Quality improvement Reporting Hection Form	FCC FormESI 1 OMB Control No. 3860-9986/OMB Control No. 3100-941 1 July 2013				
<010>	Study Area Code	411777				
<015>	Study Area Name	GOLDEN BELT TEL ASSN				
<020>	Program Year	2015				
<030>	Contact Name - Person USAC should contact regarding this data	Gina Roney				
<035>	Contact Telephone Number - Number of person identified in data line <030>	7192664334 ext.				
<039>	Contact Email Address - Email Address of person identified in data line <030>	groney@tcatel.com				
<110>	Has your company received its ETC certification from the FCC?	(yes / no ) <b>O O</b>				
<111>	If your answer to Line <110> is yes, do you have an existing §54.202(a) "5 year plan" filed with the FCC?	(yes / no ) O O				
	If your answer to Line <111> is yes, then you are required to file a progress report, on line <112> delineating the status of your company's existing § 54,202(a) "5 year plan" on file with the FCC, as it relates to your provision of voice telephony service.	611777K8112.pdf				
<112>	Attach Five-Year Service Quality Improvement Plan or, in subsequent years, your annual progress report filed pursuant to 47 C.F.R. § 54.313(a)(1). If your of CETC which only receives frozen support, your progress report is only	company is a				
	required to address voice telephony service.					
	Please check these boxes below to confirm that the attached documents(s), on lit 112, contains a progress report on its five-year service quality improvement plan pursuant to § 54.202(a). The information shall be submitted at the wire center level or census block as appropriate.	Name of Attached Document				
<113>	Maps detailing progress towards meeting plan targets					
<114>	Report how much universal service (USF) support was received					
<115>	How (USF) was used to improve service quality					
<116>	How (USF)was used to improve service coverage					
<117>	How (USF) was used to improve service capacity					
<118>	Provide an explanation of network improvement targets not met in the prior calendar year.					

(200) Ser Data Col	vice Dutage Reporting (Vicie). Section Form	FCC Form 403 OM8 Comb (166 - 800) 0988/OMB Control (16 - 806) 8 19 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
<010>	Study Area Code	411777
<015>	Study Area Name	GOLDEN BELT TEL ASSN
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Gina Roney
<035>	Contact Telephone Number - Number of person identified in data line <030>	7192664334 ext.
<0395	Contact Email Address - Email Address of nerson identified in data line c030s	gronavätnatel dos

	<a>&gt;</a>	 b1>	<b2></b2>	<b3></b3>	<b4></b4>	<<1>	<c2></c2>	<d></d>	<e></e>	<₽	<	cho
	NORS Reference Number	Outage Start Date	Outage Start Time	Outage End Date	Outage End Time	Number of Customers Affected	Total Number of Customers	911 Facilities Affected (Yes / No)	Service Outage Description (Check all that apply)	Did This Outage Affect Multiple Study Areas (Yes / No)	Service Outage Resolution	Preventative Procedures
t												
-						4						
F												
						-						
-		-										
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t												
-												
F												
t												

<010>	Study Area Code	411777				
015>	Study Area Name	GOLDEN BELT TEL ARSN				
020>	Program Year	2015				
:030>	Contact Name - Person USAC should contact regarding this data	Gina Roney				
:035>	Contact Telephone Number - Number of person identified in data line <030>	7192664334 ext.				
039>	Contact Email Address - Email Address of person identified in data line <030>	groney@toatel.com				

<702> Single State-wide Residential Local Service Charge

18.25

<703>

State	Exchange (ILEC)	SAC (CETC)	Rate Type	Residential Local Service Rate	State Subscriber Line Charge	State Universal Service Fee	Mandatory Extended Area Service Charge	Total per line Rates and Fe
State	Exchange (ILEC)	SAC (CETC)	nate type	Service Rate	State Subscriber Line Charge	State Universal Service Fee	Service Charge	Total per line nates and Fe
				- See at	tached worksheet			
222								
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		_						
		<del></del>						

0.00	and Marke June 1 and Mental Sala	SINAMAL SUBSEAU WALL MAGE SE TO SUBE FARMA OF THE ACT			
<010>	Study Area Code	411777			
<015>	Study Area Name	GOLDEN RELT TEL ASSN			
<020>	Program Year	2015			
<030>	Contact Name - Person USAC should contact regarding this data	Gina Roney			
<035>	Contact Telephone Number - Number of person identified in data line <030>	7192664334 ext.			
<039>	Contact Email Address - Email Address of person identified in data line <030>	groney@tcatel.com			

						Broadband Service -			Usage Allowance
	State	Exchange (ILEC)	Residential Rate	State Regulated Fees	Total Rate and Fees	Download Speed (Mbps)	Broadband Service - Upload Speed (Mbps)	Usage Allowance (GB)	Action Taken Whee Limit Reached (selec
									· · · · · · · · · · · · · · · · · · ·
E									
F				See attac	hod				
E				worksheet -	100				
E									
F									
F									

	120							
<010>	Study Area Code		411777					
<015>	Study Area Name		GOLDEN RELT TEL ASSN					
<020>	Program Year		2015					
<030>	Contact Name - Person USAC should contact regarding this data		Gina Roney					
<035>	Contact Telephone Number - Number of person identified in data line <030>		7192664334 ext.					
<039>	Contact Email Address	Email Address of person identified in data line <030>	groney#tcatel.com					
<810>	Reporting Carrier	Golden Belt Telephone Association, Inc.						
<811>	Holding Company	Company NA						
<812>	Operating Company	NA						

Affiliates	SAC	Doing Business As Company or Brand Designation
	See attached worksheet	-
		71 17 N 1 N VA 4 1

010>	Study Area Name	411777 GOLDEN RELT TEL ARRN
020>	Program Year	2015
030>	Contact Name - Person USAC should contact regarding this data	Gina Roney
:035>	Contact Telephone Number - Number of person identified in data line <030	)> 7192664334 ext.
039>	Contact Email Address - Email Address of person identified in data line <03	0> groneystcatel.com
910>	Tribal Land(s) on which ETC Serves	
920>	Tribal Government Engagement Obligation	Name of Attached Document
f vour c	ompany serves Tribal lands, please select (Yes, No, NA) for each these boxes	
	rm the status described on the attached document(s), on line 920,	
	trates coordination with the Tribal government pursuant to	Select
54.31	B(a)(9) includes:	(Yes,No,
921>	Needs assessment and deployment planning with a focus on Tribal community anchor institutions.	NA)
922>	Feasibility and sustainability planning;	
923>	Marketing services in a culturally sensitive manner;	
924>	Compliance with Rights of way processes	
925>	Compliance with Land Use permitting requirements	
926>	Compliance with Facilities Siting rules	
927>	Compliance with Environmental Review processes	
928>	Compliance with Cultural Preservation review processes	
929>	Compliance with Tribal Business and Licensing requirements.	

<010>	Study Area Code	411777
<015>	Study Area Name	GOLDEN BELT TEL ASSN
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Gina Ronay
<035>	Contact Telephone Number - Number of person identified in data line <030>	7192664334 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030	groney#tcatel.com
<1120>	Please check this box to confirm no terrestrial backhaul options exist within the supported area pursuant to § 54.313(G)	
<1130>	Please check this box to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 kbps upstream within the supported area pursuant to § 54.313(G)	

<010>	Study Area Code		411777
<015>	Study Area Name		GOLDEN BELT TEL ASSN
<020>	Program Year		2015
<030>	Contact Name - Person USAC should contact regarding this data		Gina Roney
<035>	Contact Telephone Number - Number of person identified in data lin	e <030>	7192664334 ext.
<039>	Contact Email Address - Email Address of person identified in data lin	ne <030>	groney@tcatel.com
<1210>	Terms & Conditions of Voice Telephony Lifeline Plans	4	11777KS1210.pdf
		-	Name of Attached Document
<1220>	Link to Public Website	нттр	
'Please cl	heck these boxes below to confirm that the attached document(s), on line 12	10,	
or the we	bsite listed, on line 1220, contains the required information pursuant to		
5 54.422	(a)(2) annual reporting for ETCs receiving low-income support, carriers must		
annually i	report:		
<1221>	information describing the terms and conditions of any voice telephony service plans offered to Lifeline subscribers,	7	
<1222>	Details on the number of minutes provided as part of the plan,	1	
(1223>	Additional charges for toll calls, and rates for each such plan.		

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<b>小静</b> 雄		· · · · · · · · · · · · · · · · · · ·		
100	190 - 190 -	A TOKENSTYLE IN MASS		
<010>	Study Area Code			
<010>	Study Area Name	411777		
<020>	Program Year	GOLDEN BELT TEL ASSN		
<030>	Contact Name - Person USAC should contact regarding this data	Gina Roney		
<035>	Contact Telephone Number - Number of person identified in data line <030>	7192664334 ext.		
<039>	Contact Email Address - Email Address of person identified in data line <030>	groney@tcatel.com		
_		***		
CHECK t	he boxes below to note compliance as a recipient of Incremental Connect Amer	ica Phase I support, frozen High Cost support, Hig	h Cost support to offset access charge	reductions, and Connect America Phase II
	support as set forth in 47 CFR § 54.313(b),(c),(d),(	e) the information reported on this form and in t	he documents attached below is accur-	ate.
+2010	Incremental Connect America Phase I reporting			
<2010>	2nd Year Certification (47 CFR § 54.313(b)(1))			
<2011>	3rd Year Certification (47 CFR § 54.313(b)(2))			
	Price Cap Carrier Receiving Frozen Support Certification (47 CFR § 54.312(a))			
<2012>	2013 Frozen Support Certification (47 CFR § 54.312(a))			
<2012>	*			
	2014 Frozen Support Certification			
<2014>	2015 Frozen Support Certification			
<2015>	2016 and future Frozen Support Certification			
	Price Cap Carrier Connect America ICC Support (47 CFR § 54.313(d))			
<2016>	Certification Support Used to Build Broadband			
	720			
	Connect America Phase II Reporting (47 CFR § 54.313(e))			
<2017>	3rd year Broadband Service Certification		<del></del>	
<2018>	5th year Broadband Service Certification		<b>=</b>	
<2019>	Interim Progress Certification			
<2020>	Please check the box to confirm that the attached document(s), on pursuant to § 54.313 (e)(3)(ii), as a recipient of CAF Phase II support addresses of community anchor institutions to which began providi preceding calendar year.	shall provide the number, names, and		
<2021>	Interim Progress Community Anchor Institutions	I		1
				1
		Name of A	tached Document Listing Required Info	ormation
		Hame of A	made of the street of the stre	a mental

0>	Study Area Code	\$11777
15>	Study Area Name	GOLDEN BELT TEL ASSN
30>	Program Year  Contact Name - Person USAC should contact regarding this data	2015
35>	Contact Telephone Number - Number of person identified in data line <030>	Gina Roney 7192664334 ext.
39>	Contact Email Address - Email Address of person identified in data line <030>	gronev@tcatel.com
ECK t		nt to 47 CFR § 54.20(2a)) and, for privately held carriers, ensuring compliance with the financial reporting requirements set forth he information reported on this form and in the documents attached below is accurate.
101	Progress Report on 5 Year Plan	1
	Milestone Certification (47 CFR § 54.313(f)(1)(i))	
		Name of Attached Document Listing Regulred Information
011)	Please check this box to confirm that the attached document(s), on line 3 § 54.313 (f(1)(s)), the carrier shall provide the number, names, and addressed to broadband service in the preceding calendar year.	2012 contains the required information pursuant to esses of community anchor institutions to which began
12)	Community Anchor institutions (47 CFR § 54.313(f)(1)(ii))	
		Name of Attached Document Listing Required Information
	is your company a Privately Held ROR Carrier (47 CFR § 54.313(1)(2)) If yes, does your company file the RUS annual report	(res/No)
ase	check these boxes to confirm that the attached document(s), on line 301	7, contains the required information pursuant to § 54.313(f)(2) compliance requires:
	Electronic copy of their annual RUS reports (Operating Report for Telecommunications Borrowers)	
16)	Document(s) for Balance Sheet, Income Stalement and Statement of Ca	ssh Flows
		411777K83017.pdf
17)	If the response is yes on line 3014, attach your company's RUS annual report and all required documentation	
		Name of Attached Document Listing Required Information
18)	If the response is no on line 3014, is your company audited?	(Yes/No)
	If the response is yes on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains	
19)	Either a copy of their audited financial statement; or (2) a financial report in a fe	ormat comparable to RUS Operating Report for Telecommunications.
20)	Document(s) for Balance Sheet, Income Statement and Statement of C	ash Flows
21)	Management letter issued by the independent certified public accountant that	performed the company's financial audit.
	If the response is no on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains:	
022)	Copy of their financial statement which has been subject to review by an independent certified public accountant; or 2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers.	
23)	our cowers, Underlying information subjected to a review by an independent certified public accountant	
(24) (25)	Underlying information subjected to an officer certification.  Document(s) for Balance Sheet, income Statement and Statement of Columns of Statement and Statement of Columns of Statement and Statement of Columns of Statement of Statement of Colum	esh Flows
		l l

0.		
<010>	Study Area Code	411777
<015>	Study Area Name	GOLDEN BELT TEL ASSN
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Gina Roney
<035>	Contact Telephone Number - Number of person identified in data line <030>	7192664334 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	groney@tcatel.com

#### TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

Certification of Officer as to the Accuracy of the Data Reported for the Annual Reporting for CAF or LI Recipients				
	ertify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual reporting requirements for universal service support ipients; and, to the best of my knowledge, the information reported on this form and in any attachments is accurate.			
Name of Reporting Carrier:				
Signature of Authorized Officer:	Date			
Printed name of Authorized Officer:				
Title or position of Authorized Officer:	^			
Telephone number of Authorized Officer:				
Study Area Code of Reporting Carrier:	Filing Due Date for this form:			
Persons willfully making false statements on this form can	be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.			

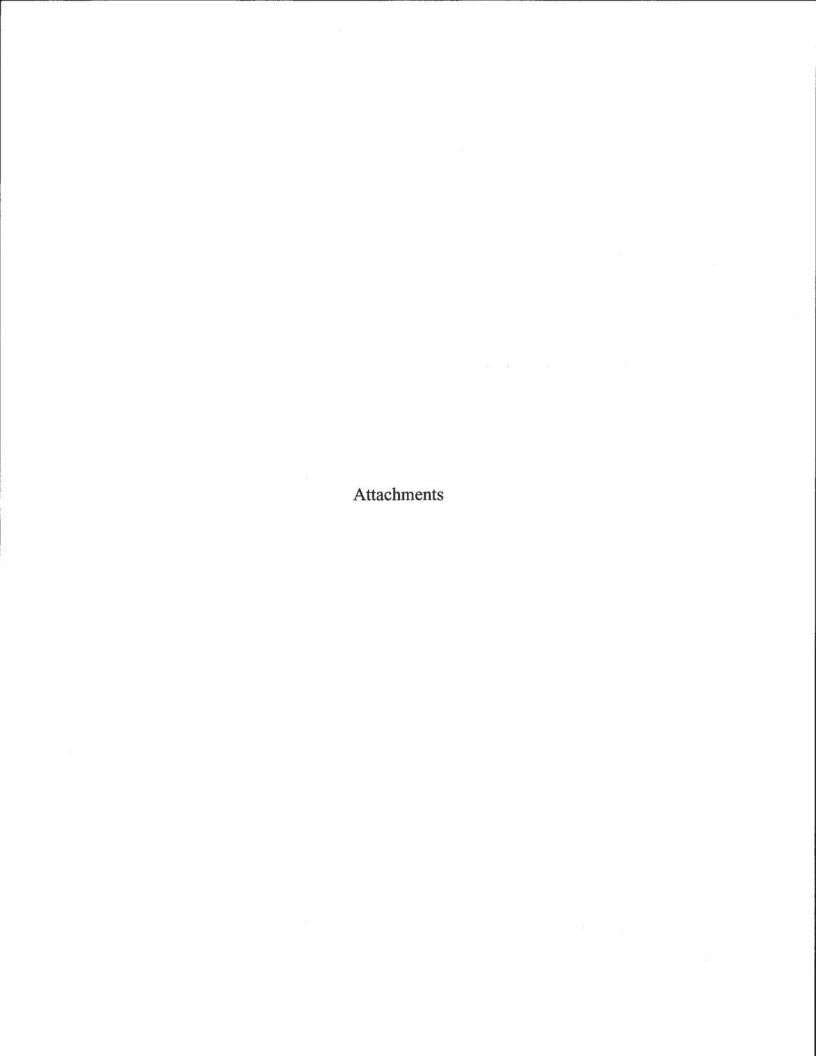
37	7.00	
<010>	Study Area Code	411777
<015>	Study Area Name	GOLDEN BELT TEL ASSN
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Gina Roney
<035>	Contact Telephone Number - Number of person identified in data line <030>	7192664334 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	groney@tcatel.com

#### TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

certify that (Name of Agent)_Gina_Roney Is authorized to submit the information reported on behalf of the reporting carrier. I also certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual data reporting requirements provided to the authorized agent; and, to the best of my knowledge, the reports and data provided to the authorized agent is accurate.					
Name of Authorized Agent: Gina Roney	- 4071 T				
Name of Reporting Carrier: GOLDEN BELT TEL ASSN					
Signature of Authorized Officer: CERTIFIED ONLINE	Date:	06/24/2014			
Printed name of Authorized Officer: Beau Rebel					
Title or position of Authorized Officer: General Manager	AND DESCRIPTION OF THE PROPERTY OF THE PROPERT				
Telephone number of Authorized Officer: 7853724236 ext.					
Study Area Code of Reporting Carrier: 411777	Filing Due Date for this form: 07/01/2014				

#### TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent Authorized to File Annual Reports for CAF	or LI Recipients on Benair of Repo	orting Carrier
, as agent for the reporting carrier, certify that I am authorized to submit the annual reports for universal so the data reported herein based on data provided by the reporting carrier; and, to the best of my knowledge		
Name of Reporting Carrier: GOLDEN BELT TEL ASSN		-
Name of Authorized Agent or Employee of Agent: Gina Roney		200 Half - 170 August - 170 Aug
ignature of Authorized Agent or Employee of Agent: CERTIFIED ONLINE	Di	ate: 06/24/2014
Printed name of Authorized Agent or Employee of Agent: Gina Roney		
Title or position of Authorized Agent or Employee of Agent Sr Financial Consultant		
Telephone number of Authorized Agent or Employee of Agent: 7192664334 ext.		
Study Area Code of Reporting Carrier: 411777 Filing Due Date for this form:	07/01/2014	



# Before the FEDERAL COMMUNICATIONS COMMISSION Washington, D.C. 20554

In the Matter of	)
Connect America Fund	) CC Docket No. 10-90
Lifeline and Link Up Reform and Modernization	) WC Docket No. 11-42

#### Request of Golden Belt Telephone Association, Inc. For Confidential Treatment

Pursuant to 47 C.F.R. § 0.459 of the Commission's Rules, Golden Belt Telephone Association, Inc. requests confidentiality with respect to the submission of the Five-Year Build-Out Plan of Golden Belt Telephone Association, Inc. in CC Docket No. 10-90 and WC Docket No. 11-42.

The following information is submitted pursuant to 47 C.F.R. § 0.459(b) of the Commission's rules:

- (1) Golden Belt Telephone Association, Inc. requests that the Company's Five-Year Build-Out Plan and Narrative Description and attached herewith be given confidential treatment.
- (2) The Company's Five-Year Build-Out Plan and Narrative Description are submitted to the Commission pursuant to the USF/ICC Transformation Order (November 18, 2011) and 47 C.F.R. §§ 54.202(a)(1)(ii) and 54.313(a)(1).
- (3) Specific details, including financial, contained in the Company's Five-Year Build-Out Plan and Narrative Description are confidential commercial information routinely withheld from public inspection in accordance with 47 C.F.R. § 0.457(d).
- (4) The information contained the Company's Five-Year Build-Out Plan and Narrative Description is of both a financial and competitive nature regarding the provision of telecommunications services. The telecommunications industry is highly competitive.

- (5) The financial and competitive information provided herein is information that would not customarily be released to the public. Due to the competitive environment of the marketplace, release of this information could substantially harm Golden Belt Telephone Association, Inc.'s business and physical infrastructure.
- (6) In order to prevent unauthorized disclosure of the subject information, the attached Five-Year Build-Out Plan and Narrative Description are being filed via express delivery service.
- (7) The subject information is not available to the public or any third parties.
- (8) Pursuant to 47 C.F.R. § 0.457(d), the subject material is not routinely available for public inspection and should continue to be withheld from public inspection at any time now or in the future.

(9) Not applicable.

Respectfully submitted,

Beau Rebel

General Manager

Golden Belt Telephone Assoc., Inc.

103 Lincoln Street

Rush Center, KS 67575

(785) 372-4236

Date

4105, ES saut

#### REDACTED - FOR PUBLIC INSPECTION

June 23, 2014

Charles Tyler
Telecommunications Access Policy Division
Wireline Competition Bureau
Federal Communications Commission
445 12<sup>th</sup> Street SW
Room 5-A452
Washington, D.C. 20554

Re: CONFIDENTIAL INFORMATION - SUBMITTED PURSUANT TO 47 C.F.R. § 0.459(b)

Dear Mr. Tyler:

Enclosed herein is one copy of the Five-Year Build-Out Plan and Narrative Description of Golden Belt Telephone Association, Inc., Study Area Code 411777 — Stamped Confidential — in accordance with 47 C.F.R. §§ 54.202(a)(1)(ii) and 54.313(a)(1) of the Commission's rules. Golden Belt Telephone Association, Inc. has redacted its entire Five-Year Build-Out Plan and Narrative Description. Golden Belt Telephone Association, Inc. requests that the enclosed confidential information be deemed material not to be made routinely available for public inspection under the Commission's rules, 47 C.F.R. §§ 0.459(a) and 0.459(a)(3).

Respectfully submitted,

Beau Rebel

General Manager

## Attachment 1 Five-Year Service Quality Improvement Plan Golden Belt Telephone Association, Inc.

	2015 Projected Capital Expenditures	2016 - 2019 Projected Capital Expenditures
Exchange	TOTAL	TOTAL
Albert	\$77.643	\$39,130
Alexander	\$53,950	\$73,938
Bazine	\$71,500	\$61,060
Beeler	\$53,950	\$89,733
Bison	\$64,188	\$50,530
Brownell	\$75,888	\$39,13
Burdett	\$75,888	\$54,92
Ellis	\$53,950	\$57,265
Garfield	\$53,950	\$91,78
Lewis	\$53,950	\$94,413
McCracken	\$72,670	\$46,15
Ness	\$53,950	\$97,045
Otis	\$65,660	\$50,530
Ransom	\$58,045	\$69,550
Rozel	\$64,480	\$85,456
Rush Center	\$1,553,050	\$6,511,61
Timken	\$62,140	\$61,06
Utica	\$53,950	\$67,795
tota	\$2,618,792	\$7,621,04
Operating Expenses		
Plant Specific Operations	\$2,037,246	\$8,289,147
Plant Non-Specific Operations	\$832,315	\$3,413,330
Customer Operations	\$474,199	\$1,898,790
Corporate Operations	\$1,539,280	\$5,312,596
Other Operating Taxes	\$303,573	\$1,214,293
Depreciation Expense	\$2,812,049	\$10,034,194
tota	\$7,998,662	\$31,160,355
Capital Costs		
Interest Expense	\$615,933	\$2,032,692
Principal Repayment	\$832,120	\$3,759,498
Income Taxes*	\$0	\$0
Population Served	6773	6773
Area Served	3230 Sq miles	3230 Sq miles
'Does not include any cost of equi	ty capital.	

\*Does not include any cost of equity capital.

PROPRIETARY AND CONFIDENTIAL

## Attachment 2 Five-Year Service Quality Improvement Plan

Golden Belt Telephone Association, Inc.
Narrative Description

The Company has plans for a number of specific improvement projects for 2015, including new line extensions and equipment installations, cable and other equipment additions and upgrades, and maintenance of existing facilities. These projects will significantly improve voice service coverage, broadband access and speeds, and the overall capacity of the Company's network. From 2016 to 2019, the Company's service quality improvement plans are much less definite due to the uncertainties stemming from the financial impact of USF/ICC reforms. Nevertheless, the Company has evaluated its network carefully and intends to continue making improvements assuming high-cost support mechanisms continue at no less than current levels in the years 2014 and beyond.

The Company has recently completed connecting its subscribers to fiber facilities at a cost of \$16,356,431. Accordingly, it anticipates minimal additional capital expenditures to further extend these facilities within its service territory over the next five years. Nevertheless, the Company will continue to replace, maintain and upgrade fiber facilities, switching and transmission equipment as needed to give our customers the best service possible. The Company anticipates using the majority of its federal high cost support over the next five years to repay the providers of debt and equity capital that provided the funding to enable the deployment of a state-of-the-art network in a sparsely-populated, high cost area.

As set out in **Attachment 1**, the Company estimates that its total capital expenditures in 2015 within the State of Kansas will be approximately \$2,618,792. The Company also estimates that it will incur approximately \$7,998,662 in operating expenses providing service during 2015. In addition, the Company estimates that it will repay debt totaling \$1,448,053, which debt was incurred to fund projects to improve voice service coverage, broadband access and speeds, and the overall capacity of the Company's network. The Company estimates that its service quality improvements planned for 2015 will serve a population of approximately 6,773 and covers an area of approximately 3,230 square miles.

**Attachment 1** also sets out the projected capital expenditures, operating expenses, debt repayment, and population and area served for the years 2016-2019.

The aggregate dollar estimates stated above, as well as the projections set out in **Attachment 1**, are the Company's current estimates based on budget forecasts. Projections of this sort are by nature uncertain and invariably change by the time projects are completed. The Company also notes that, from year-to-year, the number and size of network improvement projects change, particularly as the Company approaches completion of network expansion and upgrades throughout its service territory. Therefore, the total capital expenditures and operating expenses will vary year-to-year regardless of the amount of USF disbursement received in each year.

**Proprietary & Confidential** 

#### Line 510: Service Quality Standards & Consumer Protection Rules Compliance

#### **Service Quality Standards**

The company complies with the service quality standards as adopted in the Kansas Corporation Commission (KCC) Docket Nos. 191,206-U and 95-GIMT-047-GIT.

#### **Consumer Protection Rules**

The company complies with the following consumer protection rules:

- FCC rules regarding verification of orders for telecommunications service as required of submitting carriers {47 CFR §64.1100}
- The FCC's Truth-in-Billing Requirements (47 CFR §64.2400)
- Billing practice standards as set out in KCC Docket No. 06-GIMT-187-GIT and subsequent billing practice standards approved by the KCC.
- All of the requirements of 47 C.F.R. § Part 64 Subpart U, Customer Proprietary Network Information and Federal Trade Commission 16 C.F.R. §681, Identity Theft Red Flags

#### **Line 610: Functionality in Emergency Situations**

- The company maintains a reasonable amount of back-up power to ensure functionality without an external power source, is able to reroute traffic around damaged facilities, and is capable of managing traffic spikes resulting from emergency situations. {47 CFR §54.202(a)}
- The company has made reasonable provisions to meet emergencies resulting from power failures; sudden and prolonged increases in traffic; staff shortages; and fire, storm, and acts of God.

<010>	Study Area Code	411777
<015>	Study Area Name	GOLDEN BELT TEL ASEN
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Gina Roney
<035>	Contact Telephone Number - Number of person identified in data line <030>	7192664334 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	groney@tcatel.com

<701> Residential Local Service Charge Effective Date

1/1/2014

<702> Single State-wide Residential Local Service Charge

<703>

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State	Exchange (ILEC)	SAC (CETC)	Rate Type	Residential Local Service Rate	State Subscriber Line Charge	State Universal Service Fee	Mandatory Extended Area Service Charge	Total per line Rates and Fe
KS	All		FR	18.25	0.0	1.53	0.0	19.78
			100					
		-						

<010>	Study Area Code	411777
<015>	Study Area Name	GOLDEN BELT TEL ASSE
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Gina Roney
<035>	Contact Telephone Number - Number of person identified in data line <030>	7192664334 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	groney@tcatel.com

State	Exchange (ILEC)	Residential Rate	State Regulated Fees	Total Rates and Fees	Broadband Service - Download Speed (Mbps)	Broadband Service -Upload Speed (Mbps)	Usage Allowance (GB)	Usage Allowance Action Taken When Limit Reached (select)
KS	All	63.95	0.0	63.95	6.0	1.0	0.0	Other, N/A
KS	A11	74.95	0.0	74.95	10.0	1.0	0.0	Other, N/A
KS	A11	94.95	0.0	94.95	20.0	1.0	0.0	Other, N/A
KS	All	164.95	0.0	164.95	50.0	1.0	0.0	Other, N/A
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<010>	Study Area Code		411777
<015>	Study Area Name		GOLDEN BELT TEL ASSN
<020>	Program Year		2015
<030>	Contact Name - Person L	JSAC should contact regarding this data	Gina Roney
<035>	Contact Telephone Num	ber - Number of person identified in data line <030>	7192664334 ext.
<039>	Contact Email Address -	Email Address of person identified in data line <030>	groney@tcatel.com
<810>	Reporting Carrier	Golden Belt Telephone Association, Inc.	
<811>	Holding Company	NA	
<812>	Operating Company	NA	

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Affiliates	SAC	Doing Business As Company or Brand Designation
GBT Communications, Inc.		GBT Communications, Inc.
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	Secretary States	

## Form 481 Line 1010: §54.313 (a) (10) - Pricing of Voice Services

The company's retail monthly residential local service rate is \$18.25.

Lifeline Assistance is a government assistance program sponsored by the FCC to reduce rates for primary residential telephone service to qualifying subscribers who receive income-based benefits.

Lifeline subscribers may receive unlimited local calling at a discount of \$9.25.

Eligible customers may obtain Toll Blocking or Limited Toll Blocking free of charge. The Company's voice lifeline plan does not include any free minutes of use for toll. Eligible customers that elect to take Toll Blocking will not be required to pay a service deposit. Toll calls are charged at standard rates.

#### Limitations:

- ✓ The discounts are applicable only on the end user's principal residence line.
- ✓ One discount per household for eligible participants is allowed. Discount is applicable towards primary residential connections only. The telephone service must be listed in your name. A household is everyone who lives together at your address as one economic unit.
- ✓ Service is non-transferable.

#### **Eligibility Requirements:**

- ✓ Participant must be verified eligible prior to participation.
- ✓ With income at or below 135% of the Federal Poverty Guidelines.
- ✓ Participating in any of the following programs: Medicaid, Supplemental Nutrition Assistance Program (f.k.a. Food Stamps), Supplemental Security Income (SSI), Federal Public Housing Assistance (Section 8), Low-Income Home Energy Assistance Program (LIHEAP), National School Lunch Program's free lunch program, and Temporary Assistance for Needy Families.
- ✓ Lifeline subscribers must re-certify eligibility each year.
- ✓ To determine if you are eligible, please contact the business office at (785) 372-4236.

The Link Up support has been eliminated of April 1, 2012.